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PTDSSAG (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									09723512			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL E	3/111 /	OR	OTHER THAN SMALL ENTITY			
FOR MUNT			ERFEED	MUMES	REXTRA .	RATE	RATE FEE		RATE	FF.E		
BASIC FEE Q7 CFR 1.10(a))							5	OR		1		
TOTAL CLAMS (D7 CFR 1.16(c))			colors 20			x s _ •		OR.	x s =			
INDEPENDENT CLAIMS			•			X 1 .	_	OR	× 5 -			
D7 CFR 1,16(b)) mines 3 = 1 ' MULTIPLE DEPENDENT CLAIM PRESENT (D2 CFR 1,16(d))						+1		OR	• •			
.10	ne difference in c	column 1 is less tha	an zero, enk	er "O" in column 2	TOTAL		OR .	TOTAL				
CLAIMS AS AMENDED - PART II												
(Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY			
ENTA		CLAIRS REMAINING AFTER AMENIOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Ž	Total CF CFR L16(4)	\$9	Minus	- 20	. A	x 8		OR	x s=			
MENDM	(IT CFR L'16(18)	3	Minus'	-3	0	x \$		OR .	x s=			
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (07 CFR 1.16(d))					+: •		OR	+5+			
						TOTAL ADOL FEE		OR	TOTAL ADD'L FEE			
		<i>**</i> • • •			<i>(Cal</i> 2)	, and the same						
P L	· ·	COLUMN 1) CLARAS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		.RATE	ADDI- TIONAL FEE		
ENDMENT	Total (37 CFR L1664)	X	Minus	2 ()		X\$=		OR	x s=			
Z Z	Independent (SF CFR 1.36(p))	3	Minus	- 3	./	x s=		OR	x \$•			
₹	PRIST PRESENT	TATION OF MULTIPL	£06-608	KT CLAN PT CF	R 1.16(4)	+5		OR.	+3a			
Ş	-19.05	(Column 1)	P	,> (Column 2)	TOTAL - ADD'L FEE		OR	TOTAL ADD'L FEE				
Ø L	•	CLAIMS REMAINING AFTER AMERIDMENT		HIGHEST MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOH TIONAL FEE] : :	RATE	ADDF TIONAL FEE		
ENDMENT	. Total co officero so	X	Minus	$\overline{20}$	-//	x.s=		OR	x se	. :		
	Endependent (DF CFR 1,16(H)	1.3	Minus	3,		x s=		OR	xs			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (07 OFR 1.16(d))					+: -		OR ·	+ 5	1		
						TOTAL ADO'L FEE		OR	TOTAL ADOL FEE	1790		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the Trighest Number Previously Peid For" IN THIS SPACE is less than 20, enter "20". If the Trighest Number Previously Peid For" IN THIS SPACE is less than 3, enter "2". The Trighest Number Previously Peid For" IN THIS SPACE is less than 3, enter "2". The Trighest Number Previously Peid For" IN THIS SPACE is less than 3, enter "2". The Trighest Number Previously Peid For" IN This SPACE is less than 3, enter "2". The Trighest Number Previously Peid For" IN This SPACE is less than 3, enter "2". The Trighest Number Previously Peid For" IN This SPACE is less than 3, enter "2".												

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							Application or Docket Number]	
PATENT APPLICATION FEE DETERMINATION RECOR									09	72	351	2	
CLAIMS AS FILED - PART ((Cotumn 1) (Column 2)							SMALL ENTITY OTHER THAN]	
TOTAL CLAIMS			M				RATE	FEE	7	RATE	FEE	1	
FOR			· NAJMBÉR FILED		NUMBER EXTRA			Basic Fe	₹ 355.00	OR	Basic Fee	710.00	1
TOTAL CHARGEABLE CLAIMS			∫∫ mil	minus 20= '		8		X\$ 9=		OR	X\$18=		1
INDEPENDENT CLAIMS			3 m	3 minus 3 = °		6	X40-			OR	X80=		1
М	ALTIPLE DEPEN	IDENT CLAIM P	RESENT				+135=	†		+270=	 	1	
* If the difference in column 1 is less than zero, enter "O" in column 2						ı	TOTAL	+	OR	TOTAL	710	ł	
_) , , , , (C	LAIMS AS A	MENDEC	- PAR	T II			,		.	QTHEA	THAN	1
_	2-17-04	(Column 1)	1	(Colum		(Column 3)	•	SMÀLL	ENTITY	OŖ	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TRONAL FEE	
3	Total	•	Minus	•.2	0	- /		X\$ 9=		OR	X\$18=		
AME	Independent	· 3	Minus		3	No.	Ì	X40=		OR	X80-		į
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ì	+135=		OR	+270=		
	4.1204	L	- ::=	٠,		•	^	YOTAL DOIT, FEE		OR	. TOTAL ADOIT, FEE		L
	. 100	(Column 1)		(Colur		(Column 3)	· · _						<u> </u>
AMENDMENT B		CLAIMS REMAINING AFTER AMENOMENT	1	HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	م	RATE	ADDI- TIONAL FEE	DECT AVAILABI
ğ	Total	. 9	Minus		Ö	•		X\$ 9=		OR	X\$18=	:	
3	Independent	. 3	Minus	•••	3	=		X40-		OR	X80=		`_
Ľ	PHSI PRESE	NTATION OF M	JETIPLE DEF	ENDENT	CLAIM	U		+135=		OR	+270=) EC
	20.04	l					- A	TOTAL DOIT, FEE		OR	YOYAL ACOIT, FEE		-
	7009	(Cominal 1)		(Cohir		(Column 3)	• •	.•		12	Ce f	-ee	•
AMENDMENT C		CLAINS REMAINING AFTER AMENDMENT		HIGH MUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	·
Š	Total	. 9	Minus .		O	8		X\$ 9-		OR	X\$18=		•
E	Independent	• 3	Minus	***	3	=	╽┠	X40=	-	•	X80=		•
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	COAIM			7403	 	OR			
* If the entry in column 1 is less than the entry in column 2, smile *0' in column 3.													
••	"If the Highest Mumber Previously Paid For' IN THIS SPACE is less than 20, enter "20." "If the Highest Mumber Previously Paid For' IN THIS SPACE is less than 3, enter "20." ADDIT. FEE OR ADDIT. FEE												
The "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1.													

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